MAR 1 6 2010

## **FAX**

то:	FROM:		
Commissioner for Patents,	C. Douglass Thomas		
Mall Stop:	Ph: 650-903-9200,		
	Fax: 650-903-9800		
COMPANY:	DATE:		
United States Patent Office	3/16/2010		
FAX NUMBER:	NO. OF PAGES (INCLUDING COVER):		
571-273-8300	17		
PHONE NUMBER:	SENDER'S REFERENCE NUMBER: IPVBP004		
RE:	RECIPIENT'S REFERENCE NUMBER: 10/826,537		
——————————————————————————————————————			

## NOTES/COMMENTS:

Transmitted herewith are the following documents for entry into the above-noted file:

Amendment F Transmittal

1 page

Credit Card Payment Form

1 page

Amendment F

14 pages

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS PRIVILEGED AND CONFIDENTIAL AND IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL NAMED ABOVE AND OTHERS WHO HAVE BEEN SPECIFICALLY AUTHORIZED TO RECEIVE SUCH. IF THE RECIPIENT IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, OR IF ANY PROBLEMS OCCUR WITH TRANSMISSION, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AT (650)903-9200. THANK YOU.

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: CHEUNG et al.

Attorney Docket No.: IPVBP004

Application No.: 10/826,537

Examiner: BLAIR, KILE O.

Filed: April 15, 2004

Group: 2614

Title:

CERTIFICATE OF FACSIMILE

I hereby cartify that this correspondence is being transmitted by facsimile to: Commissioner for Patents, P.O. Box 1450,

Alexandria, VA 22313-1450 on March 16, 2010.

Printed Name: Patricia Tate

## AMENDMENT F TRANSMITTAL

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	26	MINUS	26	00	x 26 =	x 52 =
Independent Claims	3	MINUS	3	00	× 110 =	x 220 =
Multiple Dependent Claim Present and Fee Not Previously Paid			\$	\$		
			-	Total	\$00.00	\$

X Applicant(s) hereby petition for a one- month extension(s) of time to respond to the aforementioned Office Action.

 $\boxtimes$ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension ba granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-3874 (Order No. IPVBP004).

図 Enclosed is a Credit Card Payment Form for the amount of \$65.00 to cover the additional claim fee and/or extension of time fees.

 $\boxtimes$ Please charge any additional fees required to facilitate filling the enclosed response, to Deposit Account No. 50-3874 (Order No. IPVBP004).

Respectfully submitted,

Peter P. Tong Reg. No. 35,757